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FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE PUBLIC RECORDS

2018 JUN 20 PM 12: 18

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. MCSALLY FOR SENATE INC 2141 E. CAMELBACK ROAD ADDRESS (number and street) STE. 250 (Check if address is changed) **PHOENIX** 85016 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAUL@PDSCOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address MEGAN@PDSCOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) MCSALLYFORSENATE.COM (Check if address is changed) ្តាំ២"ា ច 06 DATE 01 2018 0_0_6_6_6 0 4 0 FEC IDENTIFICATION NUMBER ▶ OR AMENDED (A) IS THIS STATEMENT NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. KILGORE, PAUL, , , Type or Print Name of Treasurer - D KILGORE, PAUL, . . Signature of Treasurer Date 06 01 2018 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

5.		TYPE OF COMMITTEE									
	Candidate Committee:										
	(a)	11/72									
	(b)	900	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)								
	Name Candi		MCSALLY, MARTHA, , ,								
	Candi Party	date Affiliatio	n REP Sought: House Senate President District								
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.								
	Name Candi										
	Party	/ Com	mittee:								
	(d)	Santa Sa Santa Santa Santa Santa Sa Santa Sa Sa Sa Sa Sa Sa Sa Sa Sa Sa Sa Sa Sa	This committee is a (National, State or subordinate) committee of the lengths (Democratic, Republican, etc.) Party.								
	Politi	ical Ac	ction Committee (PAC):								
	(e)	and the second	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:								
			Corporation Corporation w/o Capital Stock Labor Organization								
			Membership Organization Trade Association Cooperative								
			In addition, this committee is a Lobbyist/Registrant PAC.								
	(f)	No.	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)								
			In addition, this committee is a Lobbyist/Registrant PAC.								
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)								
,	Joint	Fundr	raising Representative:								
((g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.								
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.								
		Comm	nittees Participating in Joint Fundraiser								
		1	intees Farticipating in Joint Fortoralser								
		1.									
		2.	FEC ID number C								
		3.	FEC ID number C								
		4.	FEC ID number								

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FEC Form 1 (Revised	02/2009)			Page 3
Write or Type Committee Nam	e			
MCSALLY FOR	R SENATE INC			
6. Name of Any Connected	Organization, Affiliated Committee, Join	nt Fundraising Represe	ntative, or Leader	ship PAC Sponsor
MCSALLY SENATE	/ICTORY FUND	1	<u> </u>	<u> </u>
Mailing Address	824 S MILLEDGE AVE STE 101		1	
3		1 1 1 1 1 1 1		
	ATHENS	G	A 30605	
	CITY		لــــــــــــــــــــــــــــــــــــ	ZIP CODE

Relationship: Connecte	d Organization	Joint Fundraising Rep	resentative L	eadership PAC Sponsor
7. Custodian of Records: Ide books and records.	ntify by name, address (phone number	optional) and position o	f the person in po	ossession of committee
Full Name				
Mailing Address				
			<u> </u>	
Title or Position	CITY	STA	ΥE	ZIP CODE
L		Telephone number	<u> </u>	
8. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of assistant treasurer).	the treasurer of the com	nmittee; and the n	ame and address of
Full Name KILGORE of Treasurer	, PAUL, , .	1 1 1 1 1 1 1 1 1	<u> </u>	
Mailing Address	824 S. MILLEDGE AVE.		<u> </u>	
	STE. 101	1 1 1 1 1 1 1		1
	ATHENS	1 10	A 30605	
	CITY	STA		ZIP CODE
Title or Position TREASURER	ı		; 706 _{1 1}	534 7780
		Telephone number		

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Full Name of Designated Agent

Mailing Address

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

FEC ID number

FEC ID number

FEC ID number

FEC ID number

FEC Form 1S (Revised 02/2017)

Joint Fundraising Participant:

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5(g) or (h).

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	Mailing Address	PO BOX 398	6	1.			1_1_1_
							1.1.1.
		WASHINGTO	ON 		L	20027	
	Relationship:		CITY 🛦		STATE A	ZIP CODE	
	Con	nected Organization	Affiliated Committee	Joint Fundraisin	ng Representative	Leadership PA	C Sponsor
8	8. Designated Agent: 1	dentify by name, add	ress (phone number - op	tional)	1211		
	Full Name	111111			<u> </u>		
	Mailing Address	L	1 1 1 1 1 1 1 1		 		1 1 1
			<u> </u>	<u> </u>	<u> </u>		<u> </u>
****							1 1 1
a losar A j . (g	TITLE OR POSI	TION ▼	CITY A		STATE A	ZIP CODE	
, D				Telephone N	Number		<u></u>
nounebon is a located and the second of the	safety deposit boxes		nks or other depositories	in which the comm	ittee deposits fu	nds, holds accounts,	rents
Ď	Depository, etc.		<u> </u>				
) }	Mailing Addres	iss 1445-A LAUG	HLIN AVE.				
) }		للللا		1111			1. 1. 1.
M.		MCLEAN	<u> </u>		LVA	22101 -	111
I			CITY ▲		STATE A	ZIP CODE 4	•

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h).	Joint Fundraisi	ng Participant:	:			
1.				F	EC ID number	C Sanarananananananananananananananananana
2.		<u> </u>		FI	EC ID number	CI
3.				FI	EC ID number	Remains and the second
4.				F	EC ID number	С
6. Name	of Any Connected	Organization, S CLASSIC	Affiliated Committee, Jo	oint Fundraising	g Representativ	e, or Leadership PAC Sponsor
L	11111				<u> </u>	<u> </u>
ľ	Mailing Address	228 S WAS	HINGTON STREET SUITE	115	1111	
					1111	<u> </u>
_		ALEXANDR	IA		_ LVA_	22314
F	Relationship:		CITY ▲	(may)	STATE A	ZIP CODE A
	Connected	d Organization	Affillated Committee	Joint Fundr	alsing Representa	tive Leadership PAC Sponsor
8. Des ign	ated Agent: Identify	/ by name, add	ress (phone number – op	otional)		
Fuli	Name L	1111				
Mai	iling Address	1				
		1			<u></u>	
		1				
***			CITY A	-1 -1-1-	STATE A	ZIP CODE ▲
	TLE OR POSITION	•		 .		I I I I I I
			- 	lelephon	e Number	
9. Banks safety d	or Other Depositor eposit boxes or mai	ies: List all ban intains funds.	nks or other depositories	in which the cor	mmittee deposits	funds, holds accounts, rents
Name o Deposito	f Bank, EAGLE bry, etc.	BANK		1111	<u> </u>	
N	Mailing Address	2001 K STREE	T	1 1 1 1	<u> </u>	<u> </u>
			11111		<u> </u>	
		WASHINGTON	N		DC	20006
			CITY A		•	

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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g)or(h). Joint Fundr a	ising Participant:			
1.	<u> </u>	FEC	ID number	Claritanian de la company de l
2.		FEC	ID number	C
3.		FEC	ID number	
4.		FEC .	ID number	To the market was the market with the market was the market with the market was t
Name of Any Connect	ed Organization, Affiliated Committee MEN VICTORY 2018	, Joint Fundraising R	epresentative	o, or Leadership PAC Sponsor
			1 1 1	
Mailing Address	228 S. WASHINGTON ST.		1111	
	STE.115	<u> </u>	<u> </u>	<u> </u>
	ALEXANDRIA		LVA	22314
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Connec	ted Organization Affiliated Committe	e Z Joint Fundralsir	ng Representa	Leadership PAC Sponsor
	tify by name, address (phone number -	- optional)	-	
Full Name	<u> </u>	<u> </u>		
Mailing Address		11111		
		<u> </u>		
TITLE OR POSITIO	N ♥ CITY ▲		STATE A	ZIP CODE A
		Telephone N	lumber	
salety deposit boxes or t	tories: List all banks or other depositorinal naintains funds. ED BANK PO BOX 393	es in which the commi	lttee deposits	funds, holds accounts, rents
	CHARLESTON CITY A		WV STATE ▲	25322 ZIP CODE ▲
				

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Optional Supplemental information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g)	or(h). Joint Fundrais	-	
	1.	FEC ID number	-
	2.	FEC ID number	THE PARTY OF
	3.	TEC ID number	j
	4.	FEC ID number	High market
6.		Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor	-
	LI I I I I I		J
	Mailing Address	824 S MILLEDGE AVE STE 101	j
		ATHENS GA 30605	
	Relationship:	CITY ▲ STATE ▲ ZIP CODE ▲	
	Connecte	d Organization 🕍 Affiliated Committee 💹 Joint Fundraising Representative 📗 Leadership PAC Sponsor	
8.	Designated Agent: Identif	y by name, address (phone number - optional)	
	Full Name		ı
	L	<u> </u>]
	Full Name]
	L		
	L	CITY A STATE A ZIP CODE A]
	Mailing Address	CITY A STATE A ZIP CODE A	
	Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mail Name of Bank,	Telephone Number	
	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail of Bank, Depository, etc.	Telephone Number	
	Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or mail Name of Bank,	Telephone Number	
	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail of Bank, Depository, etc.	Telephone Number	

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h). Joint Fundra	uising Participant:	
1.	<u> </u>	FEC ID number
2.		FEC ID number
3.		FEC ID number
4.		FEC ID number
Name of Any Connect	ted Organization, Affiliated Committee, Joint Funds	raising Representative, or Leadership PAC Sponsor
Mailing Address	PO BOX 19128	
	TUCSON	AZ 85731-9128 - , , ,
Relationship:	CITY A	STATE ▲ ZIP CODE ▲
Conne	cted Organization Affiliated Committee Joint	Fundraising Representative Leadership PAC Sponsor
Designated Agent: Ider	ntify by name, address (phone number - optional)	
Full Name		
Mailing Address		
		<u> </u>
	1	
TITLE OR POSITIO	ON ▼ CITY ▲	STATE ▲ ZIP CODE ▲
	Tel	lephone Number
Banks or Other Deposi safety deposit boxes or i Name of Bank, Depository, etc.	tories: List all banks or other depositories in which t maintains funds.	he committee deposits funds, holds accounts, rents
Mailing Address		
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DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 .
PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

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